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Stone Rural District Council

ANNUAL REPORT

of the

MEDICAL OFFICER OF HEALTH

R. A. LEADER, L.R.C.P., M.R.C.S., D.P.H.,

FOR THE YEAR 1939.

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Stone Rural District Council.

ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

To the Chairman and Members of the Stone Rural District Council.

Mr. Chairman, Lady and Gentlemen,

I beg to submit to you herewith my annual report for the year 1939. By the time it is in your hands I shall have left your service, to take up my appointment with the Borough of Erith.

To those members of the Council who have rendered me so much assistance in the discharge of my duties I tender my grateful thanks: also to your Clerk and to your Sanitary Inspector and his staff, for invaluable assistance.

I have the honour to be, Lady and Gentlemen,

Your obedient Servant,

REGINALD A. LEADER,

Medical Officer of Health.

Staff of the Public Health Department.

Medical Officer of Health:

- R. A. Leader, L.R.C.P., M.R.C.S., D.P.H., who is also Medical Officer of Health for the Urban District of Stone, and an Assistant County Medical Officer for Staffordshire.
- Medical Superintendent of the Stone Joint Isolation Hospital, Yarnfield (part time):
 - J. R. O'Donnel, M.B., CH.B., B.A.O., who also deputises for the Medical Officer of Health during his annual leave, etc.

Sanitary Inspector and Meat Inspector:

W. HAWKES, C.R.S.I., who is also Surveyor and Inspector under the Housing, Petroleum, and Canal Boats Acts.

Assistant Sanitary Inspector:

A. Holmes, A.F.A.S., A.M.INST.B.E., who is also Deputy Surveyor.

Clerk in the Sanitary Inspector's Department:

B. K. LOVATT.

A. Statistics and Social Condition of the Area.

Area (in acres) 64.094.

- Population (a) Registrar-General's estimate of resident population mid-1939, 12,340.
 - (b) Average population appropriate to the calculation of death rates, 12,540.

Number of inhabited houses (end of 1939) according to Rate Books, 3759.

Rateable value £70,978.

Sum represented by a penny rate, £280 4s. 5d.

Your district remains predominantly agricultural, but the developments at Millmeece, and by Messrs. Wedgwood in Barlaston will render these areas somewhat industrial. Negotiations have proceeded with Messrs. Wedgwood during the year with regard to the development at Barlaston.

Bye-Laws in Force in the Area.

Bye-Laws made by the Council are now in force with regard to the following subjects:--

New Streets.
New Buildings.
Common Lodging Houses.
Dustbins.

Vital Statistics.

These statistics give particulars of the births and deaths in the district, and shew various "rates," which are compared, where possible, with those for England and Wales. A complete list of the causes of death will be found in Table 18 at the end of the report. It must be realised that the numbers concerned are small, and that the "rates" calculated from them must not be relied upon as a basis for any conclusions about conditions in the area.

Table 1. Births and Deaths.

	Total	Male	Female
•			
Legitimate	178	98	80
Live Births (Illegitimate	13	. 6	7
Still Births	7	3	4
Deaths of Infants under one year	6	3	3
Total Deaths	162	84	78

Table 2. Deaths from certain specified diseases.

Number of deaths (included in the above) from ;-		
Cancer (all ages)		23
Measles (all ages)	• • •	0
Whooping Cough (all ages)	• • •	0
Diarrhœa (under two years of age)	• • •	0

Deaths from Puerperal causes :-

		Deaths in Stone R.D.	Rate per (live and	1000 total still) births.
			Stone R.D.	England & Wales
Puerperal Sepsis	• • •	0	0	0.74
Other puerperal causes		1	5.05	2.08
Total		1	5.05	2.82

	Stone Rural Disirict	England and Wales
Birth Rate per 1000 population	15.4	15.0
Still Birth Rate per 1000 total (live and still) births	35.3	37.7
Crude Death Rate per 1000 population	12.9	12.1
*Corrected Death Rate per 1000 population	11.8	5 12.1
Death Rate of Infants under 1 year per 1000 live births	31.4	50
Death Rate of Legitimate Infants per 1000 legitimate live births	33.7	not available
Death Rate of Illegitimate Infants per 1000 illegitimate live births	0	not available

^{*}Note—The corrected Death Rate is obtained by multiplying the crude Death Rate by the factor 0.92. This factor is supplied by the Registrar-General and serves to make the rate for the district comparable, from the point of view of mortality, with the Death Rate of the country as a whole, or with the Death Rate (similarly modified) of any other district.

B. General Provision of Health Services for the Area.

Staff.

The names of the members of the staff of your Public Health department are set out on page 3 of this report. No changes occurred during the year, but your Medical Officer of Health is leaving on February 27th to take up an appointment as Deputy Medical Officer of Health on the staff of the County Borough of South Shields. His successor is Dr. R. Murray Barrow, who is well known in Stone.

It is my duty to report that the Sanitary department is still under-staffed. Your Sanitary Inspector, Assistant Sanitary Inspector and clerk in the department, are all working at full pressure, but even so much necessary sanitary inspection is being left undone. As a result of recent legislation on Public Health, Air Raid Precautions, etc., the duties falling to be performed by a Surveyor and by a Sanitary Inspector have been enormously increased, and I think that the Council should consider the appointment of an additinoal official in the very near future.

Water supplies rightly occupy a great deal of the time and thought of the Council; and it must be remembered that they also entail a vast amount of work on the part of the officials concerned.

Laboratory Facilities.

The examination of water, food stuffs, and also bacteriological and pathological material sent by General Practitioners, is undertaken by the County Laboratory, Stafford.

Table 4. Bacteriological and Chemical Examination of Water.

Bacteriological examination of water supplied	esSatisfactory Unsatisfactory	26 44
	Total	70
Chemical examination of water supplies	Satisfactory Unsatisfactory	29 37
	Total	66
Chemical examination of stream water	Satisfactory	4

Ambulance Facilities.

These remain as reported in previous years, and are adequate for the requirements of the district. Up to the outbreak of war the ambulance, which belongs to the Stone R.D.C. and the Stone U.D.C., was kept at the Stone Fire Station, controlled by the Joint Fire Brigade Committee and driven by the driver of the Fire Engine. Since the commencement of hostilities however the Emergency Committee of the Stone U.D.C. have assumed control of this vehicle, and it has been operated from the A.R.P. Ambulance Depot by the A.R.P. Ambulance drivers, being of course available for removal to hospital of sick persons or those involved in accidents, at the standard charge.

With the early arrival of the A.R.P. converted car ambulances what was an excellent and expensive vehicle may perhaps be returned to its original use, or at least held in reserve.

Two A.R.P. van ambulances of the County Council have also been available since September at the ambulance depot, and another ambulance, the property of the Stone Joint Hospital Board, is kept at the Isolation Hospital at Yarnfield.

Infant Welfare Centres.

These are provided at Stone and Eccleshall by the Maternity and Child Welfare Committee of the County Council. The Health Visitor is in charge of each case and I attend (as part of my County Council duties) as Medical Officer.

At Stone up to the end of August the numbers were steadily rising, being 1,769 attendances, as against 1,705 attendances in 1938, 1,749 in 1937, and 1,458 in 1936. Since then, however this Welfare Centre has had removals to three different premises in the town due to billeting, but is now functioning very satisfactorily in the First Aid Post.

We are very much indebted to voluntary helpers at both centres for providing tea for the mothers and for other assistance.

		1935	1936	1937	1938	1939
STONE. No. Sessions	• • •	49	46	48	47	47
Attendances of Infants (total)		2795	2334	2652	2752	2427
Attendances of Infants (from Rural District	• • •	426	489	505	401	298
ECCLESHALL. No. of Sessions.		49	50	51	50	51
Attendances of Infants	•••	481	703	826	853	933
Attendances of Ante-Natal Cases		9	10	9	2 2	18
			1		1	

In the more rural parts of the district clinics, infant welfare centres, tuberculosis dispensaries, etc., are unfortunately only available at a considerable distance. Where they are easily available the population are not slow to take advantage of them. as is shown by the attendance figure of children from the rural district at the Stone infant welfare centre.

I regard it as regrettable that such facilities are not yet available in Barlaston.

Hospitals.

The Stone Joint Isolation Hospital Board consists of representatives of Stone R.D.C. and Stone U.D.C., and is responsible for the provision of an Isolation Hospital at Yarnfield, and also a disused hospital in the same neighbourhood which is available for cases of smallpox.

At the Isolation Hospital the block formerly used by County Council Tuberculosis patients has been re-conditioned. Thus there is now accommodation for 16 Scarlet Fever patients and 16 Diphtheria patients. Plans for the provision of a few obervation cubicles are still under consideration.

The agreement whereby infectious disease patients from Uttoxeter Urban and Rural Districts are received at Yarnfield is still in force; so are the 'overflow" agreements whereby, if our hospital is full, patients from our district can be received at the Newcastle or Stafford Hospitals, or vice versa.

Dr. O'Donnell reports:-

"The following 85 patients were received at the Yarnfield Isolation Hospital during the year:—

Table 6.	From	n Stone R.D.C.	From Stone U.D.C.	From Uttoxeter.	From other Authorities
Scarlet Fever	•••	17	4	27	1
Diphtheria	• • •	*22	2	10	2
Other Diseases	• • •				

^{*} includes 14 cases from Standon Orthopædic Hospital.

Mortuary.

The arrangement by which the Public Assistance Committee of the County Council allows the reception at the Mortuary at Trent House, Stone, of bodies from the Rural District is still in force.

C. Sanitary Circumstances of the Area.

Water Supplies.

The conditions in the district with regard to water supplies are in large parts of your area far from satisfactory, and although some progress has been made one feels it is much slower than it should be.

Yarnfield this June commenced its new supply, and properties can now obtain pure water from stand pipes in the village.

At Tittensor the polluted supply from the "Dolphin Springs" was discontinued in April, and the various properties are now supplied by the Staffordshire Potteries Water Board.

Hookgate is receiving pure water from the mains belonging to the Newcastle Rural District Council following further negotiations.

Since 1937 it has been known that the water in Slindon is totally unfit for drinking. The mains from the springs to the reservoir were found to be in bad condition and were relaid. This, unfortunately, cut down the supply of water, and to augment it a borehole was sunk in an adjoining field, but the supply is still inadequate for the needs of the village. It appears that another borehole will be necessary to remedy this, and also a larger reservoir.

At Hilderstone, Moss Gate and Fulford the position has not improved since last year, as also is the case at Burston and Moddershall.

At Fair Oak a scheme was prepared to supply the area with water from the Eccleshall pumping station situated at Croxton. The cost of this was considered to be prohibitive, and another proposal to supply the village from the private supply on the Broughton and Charnes Estate was not acceptable to the trustees of the estate. It is to be hoped that further negotiations will solve this problem.

Samples taken since 1936 show that the majority of the properties in Milwich have a polluted water supply. In consequence of the proposed erection of council houses there a borehole was sunk in April, and samples taken in the following month were found to be satisfactory, as also was the yield from a rigorous pumping test. It was suggested that this borehole should be utilised to supply the whole of this district, and two schemes for this purpose were prepared. Unfortunately it was thought that the cost of these was too great, but they are to be reconsidered in six months time.

Altogether 70 samples of drinking water were taken during the year. All were submitted to bacteriological examination, and 66 to chemical analysis in addition. The Bacteriologist passed 26 as suitable for drinking purposes, and condemned 44 as showing sewage pollution. Of the 26 passed by the bacteriologist, 11 were condemned by the analyst, leaving only 15 (out of a total of 70) regarded as fit for drinking purposes.

From the foregoing paragraphs the magnitude of the water supply problem is evident, and it must remain a constant anxiety upon the minds of the Rural District Council, their Medical Officer of Health, their Sanitary Inspector and his staff.

Table No. 7 analyses, as in recent years, the water supplies at the schools in your district. It shows improvement from year to year, but I submit that the position it reveals gives no cause for complacency.

7

Table 7.

Comments	Good. Good.	ned on 18-11-37. Uge amounts of ferrou	Examined on 13-12-37. Satisfactory, but has to be carried a considerable distance. Crude water unfit for drinking. Satisfactory after filtration. (Analysed in 1939).	Water satisfactory (Analysed 1930). Filter in use. Unfit for drinking (Analysed 1936).	Water satisfactory when analysed on 14-2-38. Water unsatisfactory when analysed on 16-1-39.	Unfit for drinking (Analysed 1936 and 1937).
Water Supply	Supplied by Staffordshire Potteries Water Board Piped Supply. See page 7 Supplied by Stone U.D.C Supplied by the new mains from the Council's hore-	:	Village Pump Pump	Pump	Pump Pump	Piped Supply. See page 7
Type of Closets	Water Closets Privy Water Closets Pail Water Closets Water Closets Water Closets Water Closets Earth Earth Doil	Pail) Earth	Pail	Earth	Pail	Privy
School	Barlaston Cotes Heath Standon Swynnerton Tittensor Yarnfield Aston-by-Stone Eccleshall	Croxton Fulford	Hilderstone	Milwich, Coton. Moddershall	Offley Hay	Slindon

Drainage and Sewage Disposal.

This subject has begun to claim the close attention of the Council. The position was set out in detail in my predecessor's annual reports for 1935 and 1936; and it has not improved at all since then.

At Eccleshall the existing Sewage Works are inadequate for their purpose, and it will very soon be necessary to reconstruct them.

At Barlaston the present position is very bad, and the Wedg-wood development renders the problem very urgent. A scheme including the whole of the village and the Wedgwood factory and estate has been formulated, but owing to the Emergency all work has had to be postponed except that portion relating to the factory and part of the housing estate.

Similarly the scheme to deal with the sewage from Tittensor and Groundslow Sanatorium at the Stoke Strongford works may be abandoned and it is now possible that the Sanatorium may provide their own works.

During the year negotiations have been conducted with the neighbouring authorities to formulate a comprehensive scheme to deal with the sewage from Meir Heath, Blythe Bridge and the Stallington Mental Colony in your area, together with portions of the Cheadle and Stoke districts. Preparation of this scheme, which is a large one, is still in progress.

Public Cleansing.

The Council own a Scavenging Lorry, which collects refuse in the Swynnerton parts of Stone and Barlaston parishes, the area covered having been increased during the year.

The following places are scavenged by contract:

In Stone Rural Parish, Oulton, Moddershall, Leadendale and Meir Heath; in Fulford Parish, Blythe Bridge, Stallington, Fulford and Cross Gate; and in Eccleshall Parish the Eccleshall special drainage district.

Sanitary Inspection of the area.

A summary of the work done in the Public Health Department is tabulated below. More detailed accounts of inspections will be found under the appropriate headings.

Table 8.

		No. of Inspections	Notices	Served	Nuisanc after	Nuisance abated after Notice		
Dwelling Houses	•••	201	Informal	Formal	Informal 32	Formal		
Bakehouses	•••	12				—		
Cowsheds and Dairies	•••	157	52		45			
Slaughter Houses	•••	48	4		4			
Factories and Workshop	ps	28	4		4			

Visits to premises for the purpose of disinfection after Infectious Disease—40.

Shops and Offices.

Smoke Abatement.

Eradication of Bed Bugs.

No action under these heads has been taken during the year, for none has appeared necessary.

Camping Sites.

No licences have been issued under Section 269 of the Public Health Act, 1936, and so far as I am aware no camping has taken place in the district, except at Kibblestone Camp which is organised by the Staffordshire County Boy Scouts Association.

Swimming Baths and Pools.

The open-air swimming bath in Trentham Park, with its Chloramine purification plant, remains satisfactory.

Schools.

The Schools in your district are controlled by the Staffordshire County Council Education Committee. On the whole the standard of accommodation is good. As an assistant school medical officer under the County Council I visit all the schools regularly to inspect the children in attendance, and I also have an opportunity to criticise the premises. As a result of such criticisms a slow but steady improvement takes place.

D. Housing.

Housing Statistics.

Table 9. Number of new houses erected during the year :-

j.	By the local authority	• • •	• • •	Nil
ii.	By other local authorities	• • •		Nil
iii.	By private enterprise	• • •	• • •	61
		Total	•••	61

The houses owned by the Council still number 94; 22 were built under the Housing Act, 1919, 68 under the Housing Acts, 1923-24, and 4 under the Housing Act, 1925. No Council houses were sold during the year.

The Council have under consideration the building of a number of houses under the Housing (Financial Provisions) Act, 1938 for provision of Agricultural Workmen, and schemes were prepared by your Surveyor for the erection of some 32 houses at Blacklake, in Moddershall in the parish of Stone Rural; four houses at Milwich in the parish of Milwich; four houses at Standon in the parish of Standon; and two houses at Cotes Heath in the parish of Eccleshall.

Plans were submitted to the Ministry of Health for the two houses at Cotes and four houses at Standon, and the Ministry gave sanction for the inviting of tenders. The tenders were obtained and submitted for approval, but up to the time of preparation of this report, sanction to build the houses has not been given.

The other proposed schemes have been postponed in view of the present national situation.

Two houses were erected at Hookgreen in the parish of Stone Rural by private enterprise under this Act.

During the year the Stoke-on-Trent City Council have constructed the Stallington Hall Mental Colony in Fulford parish, but arrangements for sewage disposal have not yet been completed.

Table 10.

Distribution of houses, and new houses erected it 1939, by Parishes ;—

Parish		No of Houses on Dec. 31st, 1938.	dem	No. of Houses olished during 1	939	No. of Houses erected in 1939
Barlaston	• • •	1 66				3
Chebsey	• • •	136	•••		• • •	
Eccleshall	• • •	999		gan, start		2
Fulford	• • •	548		-	• • •	2 6
Hilderstone		91	• • •	-	• • •	I
Milwich	• • •	118	* * *		• • •	I
Sandon	• • •	158	• •			
Standon	• • •	97		—		- Contraction
Stone Rural		521		Windows Printer		12
Swynnerton		630		—		16
Ť						
		3764		O		61
		enteroid Wilderson				

Table 11.

I. Inspection of dwelling houses during the year 1939:-

i (a	Total number of houses inspected for housing defects (under Public Health or Housing Acts)	118
(t) Number of inspections made for the purpose	201
ii (a	Number of dwelling houses (included under the sub-head i above) which were inspected and	
	recorded	90
(b) Number of inspections made for the purpose	I 2 I
iii	Number of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit	
	for human habitation	nil
iv	Number of dwelling houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human	
	habitation	88

II. Re	medy of defects during the year without service of formal notices:—	01
	Number of defective dwelling houses rendered fit in consequence of informal action by the Local Authority or their Officers	27
III. A	Action under Statutory Powers during the year :-	-
(A) Proc	reedings under Sections 9, 10 and 16 of the Housing Ac	t, 1936.
i	Number of dwelling houses in respect of which notices were served requiring repairs	26
ii	Number of dwelling houses which were rendered fit after service of formal notices:—	
	(a) By owners (b) By Local Authority in default of owners	4 nil
	eedings under Public Health Acts:	
	Number of dwelling houses in respect of which notices were served requiring defects to be remedied	80
	Number of dwelling houses in which defects were remedied after service of formal notices:—	
	(a) By Owners (b) By Local Authority in default of owners	nil
• •	reedings under Sections 11 and 13 of the Housing Act, 1	1936 :
i	Number of dwelling houses in respect of which Demolition Orders were made	nil
ıi	Number of dwelling houses demolished in pursuance of Demolition Orders	nil
(D) Prod	ceedings under Section 12 of the Housing Act, 1936:	
i	Number of separate tenements or underground rooms in respect of which Closing orders were	*1
ii	Number of seperate tenements or underground	nil
	rooms in respect of which Closing Orders were	
	determined, the tenement or room having been rendered fit	nil
IV.	Housing Act, 1936, Part IV: Overcrowding:	
(a) (i)	Number of dwellings overcrowded at the end of	
<i>(</i> ::\	Number of families dwelling therein	31
` '	Number of families dwelling therein Number of persons dwelling therein	31
(b)	Number of new cases of overcrowding reported	195
	during the year	nil

(c) (i) Number of cases of overcrowding relieved during the year nil

(ii) Number of persons concerned in such cases ... nil

(d) Particulars of any cases in which dwelling houses have again become overcrowded after the Local Authority have taken steps for the abatement of overcrowding ... nil

E. Inspection and Supervision of Food. Milk Supply.

A large quantity of Milk is produced in your district, largely for consumption elsewhere. The total number of Dairy Farm premises on December 31st, 1939, was 581, as shown in the following table.

51.8% of the farms now produce Accredited Milk, the corresponding percentage a year ago being 53.5%; but there is now no Tuberculin Tested Milk produced.

There is still no Milk Pasteurisation plant in the district.

Samples of Milk for bacteriological and chemical examination are collected by the County Council.

Number of Dairy Farm premises by Parishes. Table 12. together with grade of milk produced.

Paris	h		Total	T.T. Milk	Accredited	Non-graded Milk
Barlaston	• • •	•••	45		25	20
Chebsey	• • •		18		14	4
Eccleshall	•••		168		86	82
Fulford	• • •		46	_	21	25
Hilderstone	•••		37	_	21	16
Milwich	•••		59	_	29	30
Sandon	•••		51		31	20
Standon	•••	• • •	20	_	12	8
Stone Rural	•••	•••	83		53	30
Swynnerton	•••	•••	54	_	9	45
To	otal	•••	581		301	280

Milk production in the district during the past five years.

End of year	Total number of dairy farms	Number producing T.T. Milk	Number producing Accredited Milk	Percentage of total at which T.T. or Accedited Milk was produced
1935	526		195	37.0
1936	559	2	287	51.7
1937	590	2	308	52.5
1938	590	••••	316	53.5
1939	581		301	51.8

Meat Inspection.

Your Sanitary Inspector is also Inspector of Meat, and he visits the slaughter houses in the district as frequently as is possible in view of his manifold duties.

As a result of the rationing of meat, provisions for slaughtering animals have somewhat changed, the animals now being slaughtered at one central abattoir in Stone, to which all meat is brought and inspected jointly by the Meat Inspector of Stone Urban District Council and your Meat Inspector.

Provisions are provided, however, whereby casualty cases only may be slaughtered at the two slaughterhouses registered for this purpose, namely one at Garshall Green and the other at Stableford, and no slaughtering will be carried out at any of the other slaughterhouses in future.

Under the Tuberculosis Order, 1938, 42 notices were received from the veterinary staff acting under the Ministry of Agriculture informing us that animals regarded as Tuberculous were to be slaughtered in our district.

Table 13, shows the results of meat inspection. The number of animals slaughtered in the district during the year in not known.

Table 13. Carcases Inspected and Condemned.

	Cattle, excluding Cows	Cows	Calves	Sheep and Lambs	Pigs
Number inspected	136	365	25	214	69
All diseases except Tuberculosis :					
Whole carcases condemned	_	18	_	12	
Carcases of which some part or organ was condemned	_	52	_	24	_
Percentage of the number inspected affected with disease other than Tuberculosis		19.2%	_	16.8%	_
Tuberculosis only:					
Whole carcases condemned	_	58		_	_
Carcases of which some part or organ was condemned	_	20	_	_	_
Percentage of the num- ber inspected affected with Tuberculosis		21.4%	_		_

Nutrition.

No special action has been taken during the year to increase the knowledge of the public on this subject. At my visits to the various schools in your district (in my capacity as an Assistant School Medical Officer under the County Education Committee) the subject is constantly in my mind and I have numerous opportunities to advise individual parents on methods for improving the nutrition of their children. The same is true at the Infant Welfare Centres. I also have the active assistance of the County Health Visitors, and of the Health Visitor Lecturer.

I believe that this individual action is probably more useful than any formal lectures or other form of propaganda would be. But it is possible that it might be useful to offer to give short talks at meetings of Women's Institutes and Mothers' Unions.

F. Infectious Diseases.

Scarlet Fever accounts for 19 notifications scattered over the district and throughout the year, 16 of these being treated in hospital.

Diphtheria gave rise to 25 notifications, 17 being from the Standon Orthopædic Hospital, and of the remaining eight all but one case were treated in the Isolation Hospital. The outbreak of Diphtheria which occurred in the Orthopædic Hospital commenced with a member of the nursing staff in February. Two other nurses and 14 patients subsequently contracted the disease, and repeated swabbing of everybody in or entering the buildings disclosed II carriers. As a result it was decided to offer immunisation to all patients and staff, nursing or otherwise in the hospital, and of the 115 patients, 95 were immunised with 3 injections of T.A.F. (11 of the 20 patients not immunised being the carriers), and of the nursing staff of 41, 33 were given immunisation (a combined acceptance rate of 93.5%). Of the 11 carriers, it was found necessary to remove the tonsils and adenoids of 6 children and I adult, and with the isolation of the remaining carriers in the Yarnfield Hospital the outbreak terminated in July. It is now agreed that in the future all nursing staff and patients shall be given immunisation against diphtheria on entering the hospital.

There was only one case of Dysentery, and four cases of Measles.

In April of this year the new regulations with regard to Puerperal Pyrxia came into force, and medical practitioners in your district were circularised to this effect.

In November the Minister of Health made Measles and Whooping Cough notifiable diseases throughout England and Wales, and following this arrangements were made with the Joint Isolation Hospital at Yarnfield for cases to be received there for treatment when this is considered necessary by your medical officer of health.

The campaign in the District for immunisation against diphtheria, started last year in Eccleshall, was continued in other areas through the schools. The parents of all children up to the age of 8 years were circularised offering immunisation for their children, and the response was gratifying. There were 68 acceptances out of 82 possibles, and 3 injections of 1 c.c. of Toxoid Antitoxin Flocules were given at 2-3 weekly intervals. The following are the schools concerned and but for the emergency it is certain that the whole of your area would have been immunised.

Table 14.

Schools Immunised		Percentage of Children accepting Immunisation
Standon C.E		89.4%
Cotes Heath C.	•••	100%
Swynnerton R.C.	•••	85.7%
Barlaston C.E	•••	79.3%
Tittensor C.E	•••	60%

I should like to express my thanks to the Education Department of the County Council for their co-operation; and also to the Head Teachers of the respective schools for their help, without which an 83% acceptance rate would have been impossible.

It was not found possible in include pre-school children in the campaign, but I hope that in future years this may be arranged. It may be of interest to print here the circular which is sent to parents.

Staffordshire Education Committee.

Telephone: Stafford 577.

Medical Services Department,
County Public Health Offices,
Martin Street, Stafford.

IMMUNISATION AGAINST DIPHTHERIA.

Dear Sir or Madam,

One of the most serious diseases to which children are liable is diphtheria, and during the last few years the disease has been prevalent in this county and has been responsible for several deaths among school children. Fortunately it has now been found possible to protect most children against diphtheria and its dangers by very simple means. This treatment is carried out by giving small inoculations into the skin of the arm at intervals. This is painless and only in a very few cases causes any discomfort. The full protection against the disease increases gradually, and certainly lasts for several years, at any rate for the time during which the children attend school. The treatment will be carried out free of charge by the School Doctor.

If all children in the Elementary Schools received this treatment, the disease would be stamped out, and many lives saved each year. Arrangements can be made for the treatment to be carried out at school for those children whose parents wish to protect them.

The protection obtained by this treatment will enable your child to attend school and mix with his playmates without risk even when the disease is prevalent in the district and therefore you are strongly advised to have them protected.

REMEMBER:—

Vaccination will not protect from diphtheria, inoculation will.

Delay is dangerous. All children run the risk of catching diphtheria.

The disease develops very quickly and a case may be hopeless within 24 hours of the onset.

The younger the child the more likely is the case to be fatal, the greatest number of cases and deaths occur in children between 2 and 8 years of age.

- The protection takes some months to develope—sometimes nine months—so it is very important to have the children protected while they are young. Do not wait until there is diphtheria in the family or neighbourhood.
- There is no scab or scar and the treatment is very simple and practically painless—just a needle prick in the arm on three occasions at fortnightly intervals.
- If you decide to have your child protected, please give your consent by signing your name in the space provided on this form.

Yours faithfully,

	Head Teacher.
PREVIOUSLY BEEN	d
against diphtheria and the	protection confirmed later by the Test. (Signed)
	Parent or Guardian.
Date	Address

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Small Pox	:	:	:		:	:	:	:	:	:	:	:	:	÷		:	:	:	:	:		:	:		:	:
Diphtheria, including membranous croup	:	:	:	:	_	4	00	3	4	7	:	:	p4	25	:	က	_	2	:	:	:	18		:	24	•
Scarlet Fever	:	:		_	-	27	11	-	-	-	-	:	:	19	က	-	4	9	-	:	:	67	:	61	16	•
Enteric, including Paratyphoid	:	:	:	:	:	:	•		:	:	:	:	:	•	•	:	:	:	:	:	•	:	:	<u>:</u>	:	•
Puerperal Pyrexia	:	<u>:</u>	:	:	:	:	:	:	:	-	:	:	:	-	:	:	:	:	:	:	:	:	:		:	:
Pneumonia	:	· :	:	:	:	:	:	:	:	:		_	:	ଧ	:	:		_	:	:	:	:	:	:	:	:
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Dysentery	:	:	:	,	:	:	:	:	:	:	:	:	:	_	:	:	:	:	:	:	:	:	F4	:	:	•
Other Notifiable Diseases		2	•	:	:	:	:	:	:	:	:	:	:	23	:	:	:	23	:	:	:	:	:	:	:	:
Measles	:	-		:	-	-	;	-	:	•	:	:	:	4		:	:	<i>w</i>	:	:	:	:		:	:	·:
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TUBERCULOSIS.

Table 16. New Cases and Mortality during 1939.

1		NEW (CASES			DEA	THS	
AGE Periods	Pulm	ionary	Non-Pu	almonary	Puln	nonary	Non-Pu	ılmona ry
[in years]	Male	Female	Male	Female	Male	Female	Male	Female
1			• • •		• • •		• •	
1+	•••	• • •	•••	•••	• • •	•••	•••	•••
5+	• • •	•••	• • •	•••	• • •	•••	• • •	• • •
10+	• • •	• • •	• • •	1	• • •	•••	• • •	•••
15+	• • •	• • •	• • •	• • •	• • •	•••	• • •	• • •
20+	1	1	• • •	• • •	1	1	• • •	• • •
25+	• • •	• • •	• • •	• • •	• • •	• • •	• • •	• • •
35+	2		• • •		1	1	• • •	• • •
45+	• • •	• • •	• • •	•••	1	• • •	• • •	• • •
55+	• • •	• • •	• • •	• • •	• • •		• • •	• • •
65+	• • •	• • •	• • •	•••	• • •	•••	• • •	• • •
Age not known	•••	• • •	•••	•••	•••	•••	• • •	•••
TOTAL	3	1	0	1	3	2	0	0

During the year one death from Tuberculosis accurred amongst persons not previously notified.

Table 17. No. of Cases on the Tuberculosis Register for the District at the end of the last six years.

Year	Pulm	onary	Non-Pu	llmonary	Total
	Male	Female	Male	Female	
1934 1935 1936 1937 1938 1939	36 22 16 19 16 11	32 24 15 18 17 13	11 4 7 8 8 5	23 11 8 9 8 6	102 61 46 54 49 35

Table 18. No. of New Cases and Deaths in the last six years.

		NEW	CASES		DEATHS			
YEAR	Pulm	onery	Non-Pu	lmonary	Pulm	onery	Non-Pu	llmonacy
	Male	Female	Male	Female	Male	Female	Male	Female
1934	7	6	9	4	1	1	1	0
1935	4	7	1	2	1	2	0	0
1936	5	2	4	3	6	3	0	2
1937	5	3	1	2	0	0	0	1
1938	3	2	2	3	2	3	0	1
1939	3	1	0	1	3	2	0	0

Public Health (Prevention of Tuberculosis) Regulations 1925. Public Health Act 1936 (Section 172).

No action has been taken under the above Regulations and Act.

Table 19.

Causes of Death.

in Stone Rural District, 1939

classified according to the Registrar-General's Short List of Causes.

Typhoid and Paratyphoid		Causes of Dea	th			Male	Female
2 Measles	1	Typhoid and Paratyphoid	•••				
4 Whooping Cough —	4		• • •				
5 Diphtheria <t< td=""><td>3</td><td>Scarlet Fever</td><td>• • •</td><td>•••</td><td></td><td></td><td>-</td></t<>	3	Scarlet Fever	• • •	•••			-
6 Influenza 2 3 7 Encephalitis Lethargica 1 0 8 Cerebro Spinal Fever <t< td=""><td>4</td><td>Whooping Cough</td><td>• • •</td><td></td><td></td><td>_</td><td> </td></t<>	4	Whooping Cough	• • •			_	
7 Encephalitis Lethargica 1 0 8 Cerebro Spinal Fever 9 Tuberculosis of respiratory system 2 4 10 Other Tuberculous Disease 1 11 Syphilis 12 General paralysis of the insane, tabes dorsalis 1 13 Cancer-Malignant Disease 11 12 14 Diabetes 1 15 Cerebral Hæmorrhage 6 6 16 Heart Disease 24 16 17 Aneurysm 1 18 Other Circulatory Diseases 2 3 19 Bronchitis 1 1 20 Pneumonia—all forms 3 1 21 Other Respiratory Diseases 1 22 Peptic Ulcer 2 23 Diarrhæa, etc , under 2 years <	5	Diphtheria	•••	• • •			
8 Cerebro Spinal Fever	6	Influenza	•••		• • •	2	3
9 Tuberculosis of respiratory system 2 4 10 Other Tuberculous Disease 1 11 Syphilis		Encephalitis Lethargica	•••	•••	• • •	1	0
10 Other Tuberculous Disease	1			•••	•••		
11 Syphilis			stem	• • •	• • •	2	4
12 General paralysis of the insane, tabes dorsalis 1 1 12 13 Cancer-Malignant Disease	1		•••	•••	• • •		1
13 Cancer-Malignant Disease 11 12 14 Diabetes 1 — 15 Cerebral Hæmorrhage 6 6 16 Heart Disease 24 16 17 Aneurysm 1 — 18 Other Circulatory Diseases 2 3 3 1 — 19 Bronchitis 2 3 1 1 — — 2 3 1 1 1 1 — — 2 3 1 — — 2 2 — 2 — <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td> </td>							
14 Diabetes 1 — 15 Cerebral Hæmorrhage 6 6 16 Heart Disease 24 16 17 Aneurysm 1 — 18 Other Circulatory Diseases 2 3 19 Bronchitis 1 1 20 Pneumonia—all forms 1 1 21 Other Respiratory Diseases 1 — 22 Peptic Ulcer — 22 Peptic Ulcer — 23 Diarrhæa, etc , under 2 years — — 24 Appendicitis — — 25 Cırrhosis of Liver <td< td=""><td>1</td><td></td><td>e, tabes d</td><td>orsalis</td><td>• • •</td><td></td><td> </td></td<>	1		e, tabes d	orsalis	• • •		
15 Cerebral Hæmorrhage 6 6 16 Heart Disease	- 1		• • •	• • •	• • •	11	12
16 Heart Disease			• • •	• • •	• • •	-	
17 Aneurysm 1 — 18 Other Circulatory Diseases 2 3 19 Bronchitis 1 1 20 Pneumonia—all forms 3 1 21 Other Respiratory Diseases 1 — 22 Peptic Ulcer 2 — 23 Diarrhœa, etc , under 2 years — — 24 Appendicitis — — 24 Appendicitis — — 25 Cirrhosis of Liver — — — 26 Other Diseases of Liver	- 1		• • •	•••	•••		1
18 Other Circulatory Diseases 2 3 19 Bronchitis 1 1 20 Pneumonia—all forms 3 1 21 Other Respiratory Diseases 1 — 22 Peptic Ulcer 2 — 23 Diarrhœa, etc , under 2 years — — 24 Appendicitis 2 2 25 Cirrhosis of Liver — — 26 Other Diseases of Liver			•••	•••	• • •	24	16
19 Bronchitis 1 1 20 Pneumonia—all forms 3 1 21 Other Respiratory Diseases 1 — 22 Peptic Ulcer 2 — 23 Diarrhœa, etc , under 2 years — — 24 Appendicitis 2 2 25 Cirrhosis of Liver — — 26 Other Diseases of Liver — — 27 Other Digestive Diseases 2 3 28 Acute and Chronic Nephritis 2 2 29 Puerperal Sepsis — — 30 Other Puerperal Causes — — 31 Congenital Debility, Premature Birth, Malformation, &c 3 2 32 Senility 5 8 33 Suicide 5 8 34 </td <td>1</td> <td></td> <td>•••</td> <td>• • •</td> <td>• • •</td> <td>-</td> <td></td>	1		•••	• • •	• • •	-	
20 Pneumonia—all forms 3 1 21 Other Respiratory Diseases <t< td=""><td></td><td></td><td>•••</td><td>. • •</td><td>•••</td><td></td><td>ì</td></t<>			•••	. • •	•••		ì
21 Other Respiratory Diseases 1 — 22 Peptic Ulcer 2 — 23 Diarrhœa, etc, under 2 years — — 24 Appendicitis 2 2 25 Chrhosis of Liver — — 26 Other Diseases of Liver — — 27 Other Digestive Diseases 2 3 28 Acute and Chronic Nephritis 2 2 29 Puerperal Sepsis — — 30 Other Puerperal Causes 1 31 Congenital Debility, Premature Birth, Malformation, &c 3 2 32 Senility 5 8 33 Suicide <td< td=""><td></td><td></td><td></td><td>•••</td><td>•••</td><td></td><td>ł i</td></td<>				•••	•••		ł i
22 Peptic Ulcer			• • •	•••	•••		1
23 Diarrhœa, etc , under 2 years	4			• • •	•••	_	
24 Appendicitis			•••	• • •	•••	2	
25 Cirrhosis of Liver <td></td> <td></td> <td></td> <td>• • •</td> <td>••</td> <td>_</td> <td></td>				• • •	••	_	
26 Other Diseases of Liver .	1			• • •	•••	2	2
27 Other Digestive Diseases 2 3 28 Acute and Chronic Nephritis 2 2 29 Puerperal Sepsis <td< td=""><td></td><td></td><td></td><td>• • •</td><td>•••</td><td></td><td></td></td<>				• • •	•••		
29 Puerperal Sepsis <					• • •	_	_
29 Puerperal Sepsis <				•••	•••	2	3
30 Other Puerperal Causes - 1 31 Congenital Debility, Premature Birth, Malformation, &c 3 2 32 Senility 5 8 33 Suicide 1 - 34 Other Deaths from Violence 4 5 35 Other Defined Diseases 7 8				• • •	• • •	Z	Z
31 Congenital Debility, Premature Birth, Malformation, &c 3 2 32 Senility 5 8 33 Suicide 1 - 34 Other Deaths from Violence 4 5 35 Other Defined Diseases 7 8				•••	•••		1
32 Senility 5 8 33 Suicide 1 - 34 Other Deaths from Violence 4 5 35 Other Defined Diseases 7 8	4			Talformati	on fro	2	
33 Suicide 1 — 34 Other Deaths from Violence 4 5 35 Other Defined Diseases 7 8	1		e Birtii, N	ianormati			0
34 Other Deaths from Violence 4 5 35 Other Defined Diseases 7 8			• • •	• • •	ì	1	0
35 Other Defined Diseases 7 8			•••	• • •		4	5
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	00	Other Diseases in defined of	O II W III W II	•••	•••		
Total Deaths 84 78		Total Dea	aths	• • •	•••	84	78

Administration of the Factory and Workshop Act, 1901, and the Factories Act, 1937.

I. Inspections for purposes of provisions as to health (including inspections made by Sanitary Inspectors).

Table 20.

	Number of				
Premises	Inspections	Written Notices	Occupiers Prosecuted		
Factories with mechanical power	12	2			
Factories without mechanical power	8	_	_		
Other premises under the Act (excluding) outworkers' premises)	8	_	_		
TOTAL	28	2			

II. Defects found.

Table 21.

Premises					Number of Defects	
					Found	Remedied
Want of cleanliness	• • •	•••			1	1
Overcrowding	• • •	• • •			_	<u> </u>
Unreasonable temperatur	e		• • •			_
Inadequate ventilation	• • •		• • •		_	<u> </u>
Ineffective drainage of flo	ors	•••	* * *		_	_
· ·	insufficient		• • •		_	
Sanitary Conveniences { unsuitable or defective					3	
	not separate					_
Other offences	•••	•••	•••	•••		
			TOTAL	•••	4	1
Outwork in unwholesome	premises	•••	•••		_	_

No cases were referred to H.M. Inspector and no prosecutions were instituted.



